# FINAL BILL REPORT ESHB 1424

#### C 249 L 15

Synopsis as Enacted

**Brief Description**: Concerning suicide prevention.

**Sponsors**: House Committee on Health Care & Wellness (originally sponsored by Representatives Orwall, Kagi, Jinkins, Gregerson, Goodman, Santos, Fey and Sawyer).

### House Committee on Health Care & Wellness Senate Committee on Health Care

#### Background:

The following health professions must complete training in suicide assessment, treatment, and management every six years as part of their continuing education requirements:

- counselors and certified advisors;
- chemical dependency professionals:
- marriage and family therapists, mental health counselors, and social workers;
- occupational therapy practitioners; and
- psychologists.

The following health professions must complete one-time training in suicide assessment, treatment, and management:

- chiropractors;
- naturopaths;
- licensed practical nurses, registered nurses, and advanced registered nurse practitioners;
- physicians;
- osteopathic physicians;
- physician assistants;
- osteopathic physician assistants;
- physical therapists; and
- physical therapist assistants.

A disciplining authority may, by rule, specify the minimum training and experience that is sufficient to exempt a professional from the training requirements. A disciplining authority may also exempt a professional if he or she has only brief or limited patient contact.

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This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.

The disciplining authorities governing the professions subject to the training requirements must work collaboratively to develop and maintain a model list of training programs. When updating the list, the disciplining authorities must, to the extent practicable, endeavor to include training that includes content specific to veterans. The disciplining authorities must consult with the Washington State Department of Veterans Affairs (WDVA) when identifying content specific to veterans.

Beginning July 1, 2015, school nurses, school social workers, school psychologists, and school counselors must complete training in youth suicide screening and referral as a condition for certification. The training must be at least three hours in length and be consistent with standards adopted by the Professional Educator Standards Board (PESB).

#### **Summary**:

The one-time training requirement for chiropractors, naturopaths, nurses, physicians, osteopathic physicians, physician assistants, osteopathic physician assistants, physical therapists, and physical therapy assistants is delayed until January 1, 2016. The delay does not affect the acceptability of training completed between June 12, 2014, and January 1, 2016. Certified registered nurse anesthetists and medical school graduates with limited training licenses are exempt from the training requirement.

A disciplining authority may not grant a blanket exemption to broad categories or specialties within a profession based on training and experience.

By June 30, 2016, the Department of Health (DOH) must adopt rules establishing minimum standards for training programs on the model list. The minimum standards must require that six-hour trainings include content specific to veterans and the assessment of issues related to imminent harm via lethal means or self-injurious behaviors. When adopting the rules, the DOH must:

- consult with the affected disciplining authorities, public and private institutions of higher education, experts in suicide assessment, treatment, and management, the WDVA, and affected professional associations; and
- consider standards related to the Best Practices Registry of the American Foundation for Suicide Prevention and the Suicide Prevention Resource Center.

The DOH must provide the training standards to the PESB and may provide technical assistance in the review and evaluation of education training programs.

Beginning July 1, 2017, the model list must contain only trainings that meet the minimum standards and any three-hour trainings that met the training requirements on or before July 26, 2015. The trainings on the list must include six-hour trainings in suicide assessment, treatment, and management and three-hour trainings that include only screening and referral elements. A person or entity providing the training may petition the DOH for inclusion on the model list; the DOH must add trainings to the list that meet the minimum standards. Approved educator training programs may also be included on the model list.

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Beginning July 1, 2017, the health professions subject to the training requirement must complete trainings that are on the model list. This does not affect the validity of training completed prior to July 1, 2017.

## **Votes on Final Passage:**

House 95 2 Senate 47 1 (Senate amended) House 96 0 (House concurred)

Effective: July 24, 2015